



Town of Needham Application for Employment

Are you available to work: _____ full time _____ part time _____ other

Referral source: _____ advertisement _____ job posting _____ relative _____ friend _____ other

Personal Information

Name: _____
Last First Middle

Address: _____
No. & Street Town State Zip Code

Social Security No. _____ Telephone No. _____

If hired, can you provide proof of citizenship or legal right to work? _____ Yes _____ No

Are you under 18 years of age? _____ Yes _____ No If yes, how old are you? _____

Do you have a valid Massachusetts driver's license? _____ Yes _____ No

Have you ever been employed with the Town before? _____ Yes _____ No

If yes, when? _____ in what department? _____

Have you ever been convicted of a felony? _____ Yes _____ No

If yes, please specify _____

Have you been convicted of a misdemeanor in the last five years? _____ Yes _____ No

If yes, please specify _____

Note: You are not required to furnish information for any offense committed prior to your seventeenth (17th) birthday, sealed records or first conviction for simple assault, speeding, minor traffic violations, affray or disturbance of the peace. Conviction will not necessarily be a bar to employment.

The Town of Needham is an Equal Opportunity/Affirmative Action Employer

Education

| Name/Location | Course of Study | # Years Completed | Did you Graduate (Y/N)? | Degree/Date |
|---------------|-----------------|-------------------|-------------------------|-------------|
|---------------|-----------------|-------------------|-------------------------|-------------|

| | | | | |
|-------------|--|--|--|--|
| High School | | | | |
|-------------|--|--|--|--|

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|---------|--|--|--|--|
| College | | | | |
|---------|--|--|--|--|

| | | | | |
|-----------------|--|--|--|--|
| Graduate School | | | | |
|-----------------|--|--|--|--|

| | | | | |
|----------------------------------|--|--|--|--|
| Business/ Technical/ Other | | | | |
|----------------------------------|--|--|--|--|

Please describe any specialized training or job related skills that you have that will help us evaluate your application for employment:

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Employment History (please list most current position first)

1. Employer's name: _____

Address: _____

Job Title: _____ Worked from: _____ to: _____

Immediate Supervisor's name and job title:

Pay: _____ ; _____
Starting Ending

Describe work you performed:

| |
|--|
| |
| |

May we contact this employer? _____

2. Employer's name: _____

Address: _____

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Job Title: _____ Worked from: _____ to: _____

Immediate Supervisor's name and job title:

_____ Pay: _____ ; _____
Starting Ending

Describe work you performed:

May we contact this employer? _____

3. Employer's name: _____

Address: _____

Job Title: _____ Worked from: _____ to: _____

Immediate Supervisor's name and job title:

_____ Pay: _____ ; _____
Starting Ending

Describe work you performed:

May we contact this employer? _____

4. Employer's name: _____

Address: _____

Job Title: _____ Worked from: _____ to: _____

Immediate Supervisor's name and job title:

_____ Pay: _____ ; _____
Starting Ending

Describe work you performed:

May we contact this employer? _____

Military History

Are you a veteran of the U.S. Armed Forces? _____ Yes _____ No

Branch: _____

Rank at discharge: _____ Discharge status: _____

Present military status: _____

Dates of service: from _____ to _____

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Special experience: _____

Agreement

The information provided in this application for employment is true and complete to the best of my knowledge. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand that all appointments are probationary and that I must demonstrate my fitness for continued employment during the probationary period. I also understand that I must be available from time to time for work outside normal business hours as the needs of the department require. Further, I agree to take a physical examination, given by an appointed Town physician, which may include testing for drugs or a psychological examination, as required, and recognize that any offer of employment may be contingent upon the results of such an examination. I understand that any employment offer by the Town is conditional upon my ability to establish employment eligibility under the Immigration Reform and Control Act of 1986. I authorize investigation of all statements contained in this application and the release of any pertinent information regarding my education, past employment history and background.

Date: _____

Signature: _____

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

Applicant Do Not Write Below This Line

Interview Date: _____ Interviewer: _____

Remarks: _____

Action Taken: _____

Needham Employment Application 031102

Voluntary Self-Identification Form

The Town of Needham, as part of its commitment to Equal Employment Opportunity, and to its Affirmative Action program, invites you to provide the following information. All applicants will be considered without regard to race, color, religion, gender, national origin, age, marital or veteran status, medical condition or handicap. The information is voluntary and refusal to provide it will not have any bearing on our employment decision. The data is confidential and will be filed separately. It will be available only to authorized personnel and is used to further the Town's Equal Employment Opportunity and Affirmative Action programs. Your cooperation is appreciated.

Name: _____

Please check one of the following: _____ male _____ female

Please indicate which of the following describes your ethnicity:

- _____ White - All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
 - _____ Black - All persons having origins in any of the black racial groups of Africa.
 - _____ Hispanic - All persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.
 - _____ Asian or Pacific Islander - All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.
 - _____ American Indian or Alaskan Native - All persons having origins in any of the original peoples of North America maintaining cultural identification through tribal affiliations or community recognition.
 - _____ Cape Verdean - All persons having origins in the Cape Verde Islands.
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Please indicate below if you are:

_____ Disabled

Please state the nature of your disability and whether or not you might require some type of accommodation in the job for which you are applying:

_____ A Vietnam Era Veteran

One who served on active duty for more than 180 days any part of which duty occurred during the period between August 5, 1964 and May 7, 1975, and who received other than a dishonorable discharge as defined in the regulations implementing the Vietnam Era Veterans Readjustment Assistance Act of 1974.

_____ A Disabled Vietnam Era Veteran